POSITION INTEREST REQUEST

(CLASSIFICATION TITLE)				(OC#)	
NAME:	Last	First	84:441-1	-:4:-1	
		First	Middle I	nitiai	
ADDRES	Number and Street	City	State	Zip Code	
(H) PHON	IE#(W) PHONE #			
May we	contact you at work phone #? Yes (Please contact us at 859-258	No 3-3051 if you have not heard anything 2 w	eeks past the filing deadline	date)	
IF YES V	VHAT IS YOUR CURRENT TITLE?	ITY GOVERNMENT EMPLOYEE?			
*****	*************	**************************************		********	
	I HAVE REVIEWED TH	HE JOB POSTING FOR THE ABOV	E MENTIONED POSITION	DN	
Regula partici applica to assi	ations, which require employers to pation in, be denied the benefits ants must be able to perform <u>all</u> e	Government supports the purp to ensure that no qualified individe s of, or otherwise be subjected to essential job functions with or with the returned with your application this recruitment process.	lual with disabilities sha o discrimination in emp hout reasonable accom	III be excluded from loyment. However, modations. In order	
Inform confide		of your application or official p	personnel records and	will be considered	
Please a	answer the following question(s):				
Α.	After reviewing the job posting which includes essential job tasks, can you perform the essential job duties and responsibilities of the position (with or without reasonable accommodation)?				
	Select One:				
	requisite skills, experience, educatio	with Disabilities Act of 1990 (ADA), a q on and other job related requirements orm the <u>essential functions</u> of the employ	is defined as an individua	al who, with or without	
B.	If reasonable accommodation are needed please complete the following:				
	1. Are reasonable accommodations needed during the testing process and are you willing to discuss same?				
	Select One:				
	(<u>Please Note</u> : The person must successfully complete the job testing process with reasonable accommodations if necessary in an open and competitive manner with all other applicants for the position. ADA does not apply reasonable accommodations for employment tests that require the use of sensory, manual or speaking skills where the tests are intended to measure those skills.)				
	2. If you are a person with a disability, would you be willing to discuss what reasonable accommodations may be needed at the appropriate time during the hiring process?				
	Select One:				
	(<u>Please Note</u> : We cannot proce accommodations would be needed	eed with your application unless .)	you are willing to disc	uss what reasonable	
	Signature of Applicant	Social Security	Number	Date	
FOR INT	ERNAL USE ONLY: The above applicant cussion(s) with the applicant, the following	************************************* t is in the TOP 5 on the eligibility list and ing workplace accommodation(s) would be	s being certified to the Division	on for a job interview and	